## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Ref. Seq. 1450

Box 1450

Alexandria, Virginia 22313-1450

or Ext. \$571-273-2885

				,				
INSTRUCTIONS: This appropriate. All further a indicated unless corrector maintenance fee notification		for transmitting the ISS ing the Patent, advance of serwise in Block I, by (	UE FEE and PUBLIC orders and notification a) specifying a new co	ATION FEE (if requi) of maintenance fees verespondence address.	ired). Blocks vill be maile and/or (b) i	s I through 5 sh d to the current indicating a separ	ould be completed where correspondence address at ate "FEE ADDRESS" for	
CURRENT CORRESPONDE	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.							
27820	7590 12/30	/2009						
WITHROW & 100 REGENCY I SUITE 160		Lecroby certify that this Foc() Transmittal being deposited with the United States Postal Service with still fiscency Transmittal is being deposited with the United States Postal Service with still fiscent postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being flustmitted to the USPTO (571) 273-2885, on the date indicated below.						
CARY, NC 2751	•		1				(Depositor's name)	
			1				(Segnature)	
			l				(Date)	
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/693,807	10/693,807 10/24/2003		Dany Sylvain		7000-265		2655	
TITLE OF INVENTION:	REHOMING VIA TU	NNEL SWITCHING						
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D		E FEE TO	TAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$0	50		\$1510	03/30/2010	
EXAMINER		ART UNIT	CLASS-SUBCLASS					
SALL, EL HADJI MALICK		2457	709-227000					
I. Change of correspondence address or indication of "Fee Address" (37 CFR 1,353).  Change of correspondence address (or Change of Correspondence Address form ITO/SB/12) state-free.  "Fee Address" indication (or "Fee Address" indication form FTU/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.			(1) the names of user agents OR, alter (2) the name of a s registered attorney 2 registered patent	For printing on the patent front page, list the name of up to 1 registered patent attorneys agents OR, alternatively, the name of up to 1 registered patent attorneys of agent and the names of up to 1 givered attorney or agent and the names of up to 1 givered attorney or agent and the names of up to 1 givered attorney or agent and the names of up to 1 givered attorney or agent and the names of up to 1 givered attorney or agent and the names of up to 1 givered attorney or name of up to 2 givered attorney or name of up to 1 givered				
3. ASSIGNEE NAME AT	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or	type)				
PLEASE NOTE: Unle recordation as set forth	ess an assignee is ident h in 37 CFR 3.11. Comp	ified below, no assigned pletien of this form is NO	data will appear on the office of the data	e patent. If an assign an assignment.	occ is identifi	ied below, the de	cument has been filed for	
(A) NAME OF ASSIC				TY and STATE OR				
AVAYA, INC. Basking Ridge, New Jersey (USA)								
Please check the appropri	ate assignee category or	r categories (will not be p	printed on the patent):	☐ Individual	orporation or	other private gro	ap entity Government	
4a. The following fee(s) a	re submitted:	4	b. Payment of Fee(s): (		ny previousi	y paid issue fee :	hown above)	
Issue Fee		☐ A check is enclosed.  ☐ Payment by credit eard. Form PTO-2038 is attached.						
☐ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies			The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any					
			overpayment, to D	eposit Account Numb	cr 50-17	32 (ciiclose ar	extra copy of this form).	
5. Change In Entity Stat	ius (from status indicate) s SMALL ENTITY state		☐ b. Amilicant is no	longer claiming SMA	LL ENTITY	status Sec 37 CF	R 1 27(a)(2)	
							e assignee or other party in	
Authorized Signature	John R.	Witcher, I		Date	March 25	, 2010		
Typed or printed name John R. Witcher, III			<del></del>	Registration l	¥0	877		
This collection of informa an application. Confident submitting the completed this form and/or suggestic Box 1450, Alexandria, V Alexandria, Virginia 223 Under the Paperwork Rec	ation is required by 37 C iality is governed by 35 I application form to the ons for reducing this bu irginia 22313-1450. DC 13-1450. duction Act of 1995, no	CFR 1.311. The informat i U.S.C. 122 and 37 CFR e USPTO. Time will var inden, should be sent to to D NOT SEND FEES OR persons are required to re	ion is required to obtain  1.14. This collection is y depending upon the i he Chief Information O COMPLETED FORM  espond to a collection o	or rotain a benefit by estimated to take 12 dividual case. Any c flicer, U.S. Patent and a TO THIS ADDRES information unless it	the public when insules to expended to expended to the comments on the comments of the comment	nich is to file (and omplete, includin the amount of tir Office, U.S. Depr of Commissioner in the control	by the USPTO to process g gathering, preparing, and the you require to complete rument of Commerce, P.O. or Patents, P.O. Box 1450, number.	